UPPER COLORADO RIVER INTERAGENCY FIRE MANAGEMENT

USFS - White River National Forest
BLM - Grand Junction
USFS - Grand Mesa National Forest

PRESCRIBED FIRE BURN PLAN

for

Project Name

COMPLEXITY LEVEL --- (*--------*)

Administrative Unit Name
Subunit Name

Fiscal Year(s) *----*

Preparation

_____ Date:____/____/____
Name; Title

Recommendation

_____ Date:____/____/
Name; Title

Technical Review

_____ Date:____/____/
Michael L. Frary; Unit Fire Ecologist / Prescribed Fire Manager (L1)

Aviation Operations Review

_____ Date:____/____/
Robert S. Leighty; Unit AFMO (Aviation & Fuels)

Approval

_____ Date:____/____/
Name; Title

FIRE SAFE CERTIFICATION

This certifies that all fire in the_____project is safe or out and further patrol and/or mop-up activities are no longer needed. (Phase projects may require copies of cover sheet to facilitate fire safe certification on several units at different time periods.)

Signed:_____ Title:_____ Date:____/____/

UCR-RX-770-09/97

Prescribed Fire Burn Plan
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PRESCRIBED BURN BRIEFING & SUMMARY	**PROJECT NAME:** **BURN UNIT:**	**PREPARED BY:**	**DATE:**

DESCRIPTION OF LOCATION INCLUDING GEOGRAPHIC FEATURES:

DESCRIPTION OF FUELS INCLUDING ADJACENT FUEL TYPES:

LEGAL LOCATION:	LATITUDE:	LONGITUDE:	VOR INFORMATION:

UNIT DESCRIPTIONS:

UNIT NAME OR NUMBER	LAT. & LONG.	ASPECTS	SLOPE RANGES	ELEVATION (TOP)	ELEVATION (BOTTOM)	MAJOR FUEL MODELS	SIZE IN ACRES

RES. SPECIALIST REVIEW:	ZONE FMO REVIEW:	Rx FIRE MGR. REVIEW:

REFER TO VICINITY, UNIT & FUEL MODEL MAPS

PRESCRIBED BURN PROJECT OBJECTIVES	**PROJECT NAME:** **BURN UNIT:**	**PREPARED BY:**	**DATE:**

SEASON OF IMPLEMENTATION:

RESOURCE MANAGEMENT OBJECTIVES:

SPECIFIC MANAGEMENT OR ADMINISTRATIVE CONSTRAINTS:

INTER-RESOURCE COORDINATION: (Check appropriate resource functions.)

Timber:____ Wildlife:____ Cultural:____ Soils:____ Recreation:____ Hydrology:

Fisheries:____ Minerals:____ Range:____ Special Uses:____ Other (specify):

SUPPORTING DOCUMENT CHECKLIST: (Check if required and show date completed or approved.)

	Required	Completed
Appropriate NEPA Analysis & Documentation		
Cooperator Agreement		
Annual/Project Work Plan		
Activity Plan (AMP, etc.)		
Clearances (T&E, Arch., Claims, Access, etc.)		
Other (Specify)		

Total Project Funds Available:_____ Estimated Cost Per Acre:
Estimated Total Project Cost: _____ Project Charge or Mgmt. Code:

RES. SPECIALIST REVIEW:	ZONE FMO REVIEW:	Rx FIRE MGR REVIEW:

PRESCRIBED BURN PRESCRIPTION	**PROJECT NAME:** **BURN UNIT:**	**PREPARED BY**:	**DATE:**

DESCRIPTION OF FIRE BEHAVIOR CHARACTERISTICS NEEDED TO MEET THE RESOURCE MANAGEMENT OBJECTIVES STATED IN OBJECTIVES SECTION, FORM UCR-202a: (REFER TO INTENSITIES REQUIRED IN BTU=S/FT/SEC. & FLAME LENGTHS).

PRESCRIBED CONDITIONS NEEDED TO PRODUCE DESIRED FIRE BEHAVIOR: (LIST SEPARATE PARAMETERS FOR DIFFERENT SEASONS, IE SPRING, SUMMER, FALL, WINTER, IF BURN IS A MULTI-SEASON PROJECT.)

PRESCRIPTION PARAMETER:	MAXIMUM FIRE BEHAVIOR PRESCRIPTION LIMIT:	MINIMUM FIRE BEHAVIOR PRESCRIPTION LIMIT:
RES. SPECIALIST REVIEW:	ZONE FMO REVIEW:	Rx FIRE MGR. REVIEW:

PRESCRIBED FIRE COMPLEXITY ANALYSIS

Project Name:_____ **Unit(s):**

FIRE BEHAVIOR: (prescribed or predicted) Yes/No

1.* Fuels extremely dry and susceptible to rapid and explosive spread.
2.** Extreme or advanced fire behavior is specified in the prescription.
3. Prescription identifies wind speed greater than 20 mph.
4. Fuel moisture of 8% or below (10 hr fuels) is prescribed.

RESOURCES COMMITTED:

1. 40 or more personnel assigned.
2. Variety of special support personnel or equipment (ie. heli-torch mixing crews, terra-torch operators, law enforcement, expanded fire information, traffic control, etc.).
3.** Heli-torch or aerial sphere dispenser operations.
4. Resources unfamiliar with local conditions and accepted prescribed fire techniques.

RESOURCES IN OR ADJACENT TO PROJECT AREA:

1.* Urban interface
2.* Developments and facilities.
3. Restricted, threatened or endangered species habitat.
4. Cultural sites.
5. Unique natural resources, special designation zones or wilderness.
5. Critical municipal watershed.
6. Other special resources. __ __

SAFETY:

1. Unusually hazardous conditions.
2. Accidents/injuries have occurred.
3.* Potential for public evacuations.
4.** Multiple aircraft are involved in the project.
5. Terrain adversely affects resource performance and may limit number of and access to safety zones.

EXTERNAL/POLITICAL INFLUENCES:

1. More than one jurisdiction involved.
2. Sensitive public/media relationships.
3. Smoke management problems.
4. Sensitive political interests.

Rating of Complexity:

The rating of complexity of a prescribed burn project is based upon the number of yes responses to the above specific statements. These ratings are:

1-3 ---- Yes answers = Level 2 or normal burn complexity.
4-6 ---- Yes answers generally indicates a Level 1 or complex burn.
7-10 -- Scrutinize the overall project as to its viability and the goals & objectives for the resource. The large number of positive or Yes answers indicates a complex or Level 1 burn but with an inordinate level of concerns or possible high level of adverse impacts.

Note:

If 2 or more of the statements identified with an asterisk (*) are checked, the burn is to be considered at the Level 1 or complex level. **Any statement marked with a double asterisk (**)** which is identified with a positive or Yes answer will identify the project at the Level 1 or complex planning & implementation level.

RES. SPECIALIST REVIEW:	ZONE FMO REVIEW:	Rx FIRE MGR REVIEW:

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PRESCRIBED BURN ORGANIZATION	**PROJECT NAME:** **BURN UNIT:**	**PREPARED BY:**	**DATE:**

POSITION (LIST ONLY THOSE NEEDED):	NAME(S):
PRESCRIBED FIRE MANAGER - LEVEL 1 - (RXM1)	
PRESCRIBED FIRE MANAGER - LEVEL 2 - (RXM2)	
BURN BOSS - LEVEL 1 - (RXB1)	
BURN BOSS - LEVEL 2 - (RXB2)	
IGNITION SPECIALIST - LEVEL 1 - (RXI1)	
IGNITION SPECIALIST - LEVEL 2 - (RXI2)	
HOLDING SPECIALIST - (USE ICS QUALS)	
PRESCRIBED FIRE BEHAVIOR ANALYST - (RXFA)	
PRESCRIBED FIRE BEHAVIOR SPEC. - (RXFS)	
PRESCRIBED FIRE BEHAVIOR MONITOR - (RXFM)	
SAFETY OFFICER - (SOF1 OR SOF2)	
FIRE INFORMATION OFFICER - (IOF1 OR IOF2)	
LAW ENFORCEMENT - (AGENCY SPECIFIC)	
HOLDING CREW MEMBERS - (USE ICS QUALS)	
IGNITION CREW MEMBERS - (USE ICS QUALS)	
HELITORCH MANAGER - (HTMG)	
HELITORCH MIXMASTER - (HTMM)	
HELITORCH PARKING TENDER - (HTPT)	
SPHERE DISPENSER OPERATOR - (SPDO)	
HELIBASE & MIXING CREW - (USE ICS QUALS)	
OTHER - (SPECIFY POSITIONS)	

RES. SPECIALIST REVIEW:	ZONE FMO REVIEW:	Rx FIRE MGR. REVIEW:

REFER TO: ORGANIZATION CHART

IGNITION ASSIGNMENT PLAN	**PROJECT NAME:** **BURN UNIT:**	**PREPARED BY:**	**DATE:**

COMPLEXITY LEVEL:	IGNITION SPECIALIST NAME:

PERSONNEL ASSIGNED & TITLE:	EQUIPMENT ASSIGNED:

NARRATIVE OF IGNITION ASSIGNMENT:

SPECIAL INSTRUCTIONS:

ZONE FMO REVIEW:	UNIT AFMO (OPS) REVIEW:	Rx FIRE MGR. REVIEW:

UCR-Rx-204a-09/97

REFER TO: MAP OF FIRING PATTERNS

HOLDING ASSIGNMENT PLAN	**PROJECT NAME:** **BURN UNIT:**	**PREPARED BY:**	**DATE:**

COMPLEXITY LEVEL:	HOLDING SPECIALIST NAME:

PERSONNEL ASSIGNED & TITLE:	EQUIPMENT ASSIGNED:

NARRATIVE OF HOLDING ASSIGNMENT:

SPECIAL INSTRUCTIONS:

ZONE FMO REVIEW:	UNIT AFMO (OPS) REVIEW:	Rx FIRE MGR. REVIEW:

UCR-Rx-204b-09/97 REFER TO: MAP OF CONTROL LINES AND SPECIAL FEATURES.

MOP-UP/PATROL ASSIGNMENT PLAN	**PROJECT NAME:** **BURN UNIT:**	**PREPARED BY:**	**DATE:**

COMPLEXITY LEVEL:	HOLDING SPECIALIST NAME:

PERSONNEL ASSIGNED & TITLE:	EQUIPMENT ASSIGNED:

NARRATIVE OF PATROL AND MOP-UP ASSIGNMENT:

SPECIAL INSTRUCTIONS:

ZONE FMO REVIEW:	UNIT AFMO (OPS) REVIEW:	Rx FIRE MGR. REVIEW:

UCR-Rx-204c-09/97

REFER TO MAP OF CONTROL LINES, FIRING PATTERN MAP, CONTINGENCY PLAN AND SPECIAL FEATURES.

CONTINGENCY PLAN OF ACTION PART 1	PROJECT NAME: BURN UNIT:	PREPARED BY:	DATE:

FIRE OUTSIDE OF DESIGNATED BURN UNITS: The Burn Unit or Units is that which is targeted to be burned under prescribed conditions. If the fire leaves the burn unit(s) and spots or spreads into a secondary portion of the allowable burn area within the defined Maximum Manageable Area (MMA), firing operations will cease if necessary. Holding forces will proceed promptly to the spot fire or Aslop-over@ and initiate the appropriate strategy as determined by the Burn Boss and Burn Plan. Ignition may continue once the situation is appropriately managed. If the current and predicted fire behavior exceeds the capabilities of the on-site personnel and any project funded reinforcements to contain the fire within the MMA, then the action will be the same as that described for the situation in which the fire exceeds the MMA. (Declared a wildfire - below).

FIRE OUTSIDE THE MAXIMUM MANAGEABLE AREA (MMA): A maximum manageable area or MMA has been identified on the project area maps. The area within the MMA is the allowable burn area. Areas outside of the MMA are outside of the burn plan jurisdiction and are called non-target areas. A fire that spreads into the non-target fuels is called an Aescape@. Any areas outside the MMA that are ignited as a result of spotting and/or spread from primary or secondary target areas will be immediately attacked with full control as the management objective. If a minor escape fire occurs, that can be adequately managed by the Aon-site@ personnel, that escape will be controlled. If the escape is more than what can be controlled with on-site personnel, the prescribed fire WILL be declared a wildfire. The Burn Boss will become the Incident Commander and remain as such until the fire exceeds his/her capabilities. In addition, the Burn Boss will immediately initiate the Escaped Fire Contingency Plan as defined below.

ESCAPED FIRE CONTINGENCY PLAN: The contingency plan is developed to consider and plan for the response from fire and resource management personnel in the event the fire exceeds the MMA and all assigned personnel=s capacity to control the escaped fire. In the event a prescribed fire becomes a wildfire, the following procedures will be implemented:

1. The Burn Boss will notify Grand Junction Interagency Dispatch of the situation.

2. An on-site Wildland Fire Situation Analysis (WFSA) will be prepared by the Burn Boss with the assistance of the Holding Specialist and other personnel as deemed necessary. The appropriate Line Officer or Designee will approve the WFSA and determine the appropriate management alternative(s) to be implemented.

3. Depending upon the type of and/or the quantity of assistance needed, Grand Junction Dispatch will order resources through appropriate dispatch channels and mutual aid agreements.

CONTINGENCY RESOURCES (Identified and verified 1 to 5 days prior to the burn date):

RESOURCE:	LOCATION & PHONE NUMBER:	RESPONSE TIME (HOURS):

ZONE FMO REVIEW:	UNIT AFMO (OPS) REVIEW:	Rx FIRE MGR. REVIEW:

REFER TO MAP OF CONTROL LINES, FIRING PATTERN MAP HOLDING FORCE CALCULATION WORKSHEET, AND THE CONTINGENCY PLAN ASSESSMENT PART 2 (UCR-Rx-204d2).

CONTINGENCY PLAN OF ACTION PART 2	PROJECT NAME: BURN UNIT:	PREPARED BY:	DATE:

RISK ASSESSMENT:

FIRE BEHAVIOR CONDITIONS WHICH MAY ADVERSELY AFFECT HOLDING & CONTINGENCY ACTIONS:

ZONE FMO REVIEW:	UNIT AFMO (OPS) REVIEW:	Rx FIRE MGR. REVIEW:

UCR-Rx-204d2-09/97

SMOKE MGMT. ASSIGNMENT PLAN	**PROJECT NAME:** **BURN UNIT:**	**PREPARED BY:**	**DATE:**

COMPLEXITY LEVEL:	GROUP SUPERVISOR NAME:

PERSONNEL ASSIGNED & TITLE:	EQUIPMENT ASSIGNED:

NARRATIVE OF SMOKE MANAGEMENT ASSIGNMENT:

SPECIAL INSTRUCTIONS (INCLUDES ON-GOING MONITORING, TRAFFIC CONTROL, ETC.):

ZONE FMO REVIEW:	UNIT AFMO (OPS) REVIEW:	Rx FIRE MGR. REVIEW:

INFORMATION ASSIGNMENT PLAN	**PROJECT NAME:** **BURN UNIT:**	**PREPARED BY:**	**DATE:**

COMPLEXITY LEVEL:	INFORMATION OFFICER NAME:

PERSONNEL ASSIGNED & TITLE:	EQUIPMENT ASSIGNED:

NARRATIVE OF PRESCRIBED FIRE PUBLIC INFORMATION ASSIGNMENT:

SPECIAL INSTRUCTIONS:

RES. SPECIALIST REVIEW:	PROGRAM MGR. REVIEW:	SUBUNIT MGR. REVIEW:

PRESCRIBED FIRE COMMUNICATIONS PLAN	**PROJECT NAME:** **BURN UNIT:**	**PREPARED BY:**	**DATE:**

BASIC RADIO CHANNEL UTILIZATION

SYSTEM:	CHANNEL:	RX FREQ:	RX TONE:	TX FREQ:	TX TONE:	ASSIGNMENT:	REMARKS:

PROJECT CELL PHONE NUMBERS

PERSONNEL NAME:	CELL PHONE NUMBER:

SPECIAL INSTRUCTIONS:

ZONE FMO REVIEW:	UNIT AFMO (OPS):	Rx FIRE MGR. REVIEW:

PRESCRIBED FIRE MEDICAL PLAN	1. PROJECT	2. DATE PREPARED:	3. TIME PREPARED:	4. SEASON:

5. PROJECT MEDICAL AID STATION OR CLINIC

MEDICAL AID STATION	LOCATION	PARAMEDICS YES OR NO

6. TRANSPORTATION

A. AMBULANCE SERVICE

NAME	ADDRESS/LOCATION	PHONE #	PARAMEDICS YES OR NO

B. AIR AMBULANCE OR FLIGHT FOR LIFE

NAME	ADDRESS/LOCATION	PHONE #	PARAMEDICS YES OR NO

7. HOSPITALS

NAME	ADDRESS OR LOCATION	TRAVEL TIME AIR	TRAVEL TIME GND	PHONE #	BURN CENTER Y OR N	HELIPAD Y OR N

8. MEDICAL EMERGENCY PROCEDURES

9. DIRECTIONS FROM NEAREST HOSPITAL OR AID STATION TO PROJECT VIA GROUND TRANSPORTATION

10. LATITUDE/LONGITUDE AND GROUND CONTACT FREQUENCY OF PROJECT AIR EVACUATION HELISPOT

LATITUDE:	**LONGITUDE:**	**FREQUENCY:**

9. PREPARED BY:	10. REVIEWED BY: (SAFETY OFFICER)

PRESCRIBED BURN SAFETY MESSAGE	PROJECT NAME: BURN UNIT:	PREPARED BY:	DATE:

GENERAL SAFETY MESSAGE:

SPECIFIC SAFETY MESSAGE INCLUDING UNIQUE HAZARDS AND CONCERNS:

ZONE FMO REVIEW:	UNIT AFMO (OPS) REVIEW:	RX FIRE MGR. REVIEW:
SUBUNIT MGR. REVIEW:	SAFETY OFFICER REVIEW:	OTHER:

UCR-RX-785-09/97

PRESCRIBED FIRE BEHAVIOR FORECAST - LONG RANGE

PROJECT NAME:	PREDICTION NUMBER:
ADMIN. SUBUNIT:	OPERATIONAL PERIOD(S):
TIME & DATE ISSUED: _____ HRS.	RXFA NAME:

WEATHER SUMMARY:

GENERAL FIRE BEHAVIOR:

SPECIFIC FIRE BEHAVIOR:

SHORT-RANGE (0-5 DAYS):

MID-RANGE (6-10 DAYS):

LONG-RANGE (11+ DAYS):

CLIMATIC TRENDS (INCLUDING DROUGHT):

SAFETY:

Remember: Base all actions on current and expected fire behavior!

UCR-RX-774-09/97

PRESCRIBED FIRE BEHAVIOR FORECAST - SHORT RANGE

PROJECT NAME:	PREDICTION NUMBER:
ADMIN. SUBUNIT:	OPERATIONAL PERIOD:
TIME & DATE ISSUED: _____ HRS.	RXFA NAME:
WEATHER SUMMARY:	
GENERAL FIRE BEHAVIOR::	
SPECIFIC FIRE BEHAVIOR:	
AIR OPERATIONS:	
SAFETY:	

Remember: Base all actions on current and expected fire behavior!

UCR-RX-775-09/97

SECTION TWO

BURN BOSS DOCUMENTATION

PRESCRIBED FIRE DELEGATION OF AUTHORITY

To: Burn Boss

I hereby delegate full authority for the ignition and management of the _____ prescribed fire project on the _____ Resource Area/Ranger District, Upper Colorado River Interagency Fire Management Unit.

Assumption of the project will be determined by you, the resource specialist responsible for the project, and myself as the Line Officer in Charge when prescription conditions are within the parameters desired in the approved Burn Plan.

I expect all prescribed fire actions to be executed in accordance with the Burn Plan. A copy of the document is included in the Prescribed Fire Project Package that will be presented to you.

The principal objectives I wish to have accomplished for this prescribed fire are:

1.Safety of personnel and the public is of greatest importance and should be given highest priority in planning and executing management strategies.

2.Cost efficiency is a concern, use strategies which may yield least total cost, while achieving the management goals and objectives of the Burn Plan in a safe and efficient manner.

3.Use appropriate tactics to minimize impacts to resources.

(Identify resource objectives requiring specific attention.)

Resource concerns should be coordinated with the Resource Specialist. The Resource Specialist for the project is _____.

Agency Administrator Date

BURN PLAN GO-NO-GO CHECKLIST	**PROJECT NAME:** **BURN UNIT:**		

Checklist Item:	**Yes:**	**No:**
Are <u>all</u> fire prescription parameters & specifications met?		
Are <u>all</u> smoke management prescription specifications met?		
Does the fire weather forecast meet burn plan and smoke permit criteria?		
Has an <u>Open Burning Permit</u> been issued by the State of Colorado?		
Are <u>all</u> personnel required & specified in the prescribed burn plan on-site?		
Have <u>all</u> personnel received an <u>on-site</u> briefing of the burn plan and have a clear understanding of its contents?		
Have <u>all</u> personnel been briefed on, and understand the hazards, escape routes & safety zones?		
Are <u>all</u> personnel equipped and in position with appropriate safety equipment?		
Is <u>all</u> the required equipment in place and in operating order?		
Are <u>all</u> specified contingency forces available as specified in the burn plan?		
Are on-site resources and contingency forces adequate to contain an escape in the event of a worst-case condition?		
Has the resource specialist or program manager completed a pre & post project monitoring plan and is that plan in effect?		
Are the answers to all the above questions AYes@?		
In your opinion, can the project be carried out according to plan and will the project meet the planned objectives?		

IF ALL THE FOURTEEN QUESTIONS ABOVE HAVE BEEN ANSWERED AYES@, YOU MAY PROCEED WITH INITIATION (LIGHTING) OF THE PROJECT!

IF <u>ANY</u> OF THE FOURTEEN QUESTIONS ABOVE HAVE BEEN ANSWERED ANO@, YOU <u>WILL NOT</u> INITIATE ANY ACTION UNTIL THE APPROPRIATE CORRECTIVE ACTIONS HAVE BEEN TAKEN OR UNTIL CONDITIONS ARE MORE FAVORABLE!

The following prescribed fire personnel have verified that the AGO-NO-GO@ CHECKLIST **<u>HAS BEEN MET IN IT=S ENTIRETY!</u>**

	Burn Boss	Date:	Time (24Hr):
	Ignition Specialist	Date:	Time (24Hr):
	Holding Specialist	Date:	Time (24Hr):
	Helitorch/Helibase Mgr.	Date:	Time (24Hr):
	Safety Officer	Date:	Time (24Hr):
		Date:	Time (24Hr):

UPPER COLORADO RIVER INTERAGENCY FIRE MANAGEMENT
-GRAND JUNCTION AIR CENTER-
Prescribed Fire Project Status Summary

Date:	**Time:**	**Fiscal/Cost Code:**
Project Name:		**Project Number:**
Legal: T_____ R_____ sec_____ 1/4___ 1/4___		**Latitude:** **Longitude:**
Estimated Dates/Duration:		
Planned Size of Project:		

Resources Assigned:

Overhead:_____ **Crewmembers:**_____ **Crews:**_____ **Engines:**_____

Aircraft:_____ **Dozers:**_____ **Specialized Equipment:**_____

Burn Boss:	**Phone Number:**
Zone FMO:	**Date/Time Contacted:**
Resource Advisor:	**Date/Time Contacted:**
Media Contact:	**Phone Number:**

WEATHER CONDITIONS: (CIRCLE APPROPRIATE)

(1) CLEAR	(4) T-STORM(S) IN AREA	(7) INTERMITTENT SHOWERS
(2) SCATTERED CLOUDS	(5) LIGHTNING	(8) HEAVY SHOWERS
(3) BUILDING CUMULUS	(6) OVERCAST	(9) OTHER (SPECIFY)_____

SLOPE (PERCENT) : (1) 0-25% (2) 26-40% (3) 41-55% (4) 56-75% (5) 76+%

ASPECT: (0) FLAT (2) NE (4) SE (6) SW (8) NW
(1) N (3) E (5) S (7) W (9) RIDGE OR MESA TOP

POSITION ON SLOPE:

(1) RIDGETOP	(4) MIDDLE 1/3 OF SLOPE	(7) UPPER 1/3 OF SLOPE
(2) SADDLE	(5) LOWER 1/3 OF SLOPE	(8) MESA/PLATEAU
(3) UPPER 1/3 OF SLOPE	(6) CANYON BOTTOM	(9) FLAT OR ROLLING

ELEVATION:

(0) 0-500	(2) 1501-2500	(4) 3501-4500	(6) 5501-6500	(8) 7501-8500	(10) 9501-10500
(1) 501-1500	(3) 2501-3000	(5) 4501-5500	(7) 6501-7500	(9) 8501-9500	(11) 10501+

WIND DIRECTION: **WIND SPEED:** **AVERAGE GUST (MPH):**

ACRES BURNED BY OWNERSHIP:

(1) BIA_____	(3)FWS_____	(5)PVT_____	(7)USFS_____
(2) BLM_____	(4)NPS_____	(6)STATE_____	(8)OTHER_____

UNIT NUMBER(S): **PLOT NUMBER(S):** **COST/ACRE:**

Prescribed Fire Project Status Summary - Continuation

PLOT OBJECTIVES (CIRCLE ONE)

CULTURAL SCENE MAINTENANCE:
01-HISTORICAL SCENE MAINTENANCE
02-OTHER CULTURAL SCENE MAINTENANCE
NATURAL SYSTEMS:
10-EXOTIC OR UNDESIRABLE SPECIES CONTROL
11-HABITAT MAINTENANCE
12-RESEARCH
HAZARD REDUCTIONS:
20-FUEL REDUCTION (ACTIVITY FUELS)
21-FUEL REDUCTION (NATURAL FUELS)
22-REAL PROPERTY PROTECTION
23-BOUNDARY PROTECTION
24-FUEL BREAK MAINTENANCE
MAINTENANCE:
30-DEBRIS REMOVAL
31-VISTA REMOVAL
32-HEALTH (INSECT CONTROL)
33-RIGHT-OF-WAY MAINTENANCE
SILVICULTURE:
40-SEED BED PREPARATION
41-VEGETATIVE TYPE MANIPULATION
42-INSECT AND DISEASE CONTROL

FUEL MODEL (CIRCLE ONE)

HERB AND HERB DOMINATED:
01-SHORT GRASS (1 FOOT)
02-TIMBER (GRASS & UNDERSTORY)
03-TALL GRASS (2.5 FEET)
CHAPARRAL & SHRUB FIELDS:
04-CHAPARRAL (6 FEET)
05-BRUSH (2 FEET)
06-DORMANT BRUSH, HARDWOOD SLASH
07-SOUTHERN LITTER
TIMBER LITTER:
08-CLOSED TIMBER LITTER
09-HARDWOOD LITTER
10-TIMBER (LITTER & UNDERSTORY)
SLASH:
11-13-SLASH MODELS (SPECIFY)_____

BENEFITTING PROGRAM BY ACRES:

PROGRAM:	ACRES:
FORESTRY	_____
RANGE	_____
WILDLIFE	_____
HAZARD REDUCTION	_____
WATERSHED	_____
ECOSYSTEM HEALTH	_____
OTHER	_____

FIRING TYPE: **STRATEGY:** 1) HEAD FIRE 2)BACKING FIRE 3)SPOT FIRE 4)CONCENTRIC FIRE
METHOD: 1) HAND IGNITION 2)AERIAL IGNITION 3)REMOTE IGNITION

WEATHER STATION:	**BI:**	**FMZ:**

START **DATE:** **TIME:**
CONTROLLED **DATE:** **TIME:** **ACRES:**
DECLARED OUT **DATE:** **TIME:** **ACRES:**

COMMENTS:

SIGNATURE:	**DATE:**

# IMPLEMENTATION COST SUMMARY - PRESCRIBED FIRE	PROJECT NAME BURN UNIT	PREPARED BY:	DATE:

Project Implementation Costs	Actual Cost ($)
Ignition Crew Costs (personnel only)	
Holding Crew Costs (personnel only)	
Mop-Up & Patrol Costs (personnel only)	
Engine Costs (vehicle FOR & mileage only)	
Heavy Equipment Costs (including operators & transport costs)	
Overhead Costs (burn team)	
Aircraft Costs (includes recon aircraft hours)	
Ignition Supplies	
Holding Supplies	
Dispatcher Costs	
Cooperating Agency Costs (include in-kind assistance)	
Safety Supplies (include personal protective equipment)	
Normal wear & tear to existing equipment	
Contracts (include fuel supplies, etc.)	
Other (specify)	
TOTAL OF ALL ACTUAL COSTS (in whole dollars)	

IMPLEMENTATION COST CALCULATION:

TOTAL IMPLEMENTATION COST _____ divided by _____ ACRES = $_____ PER ACRE

NOTE: These costs DO NOT include planning and monitoring costs but only identify the actual costs associated with IMPLEMENTATION of the project. Resource personnel should record all other costs associated with the project to obtain the actual unit costs for the entire project.

COMMENTS:

SECTION THREE

WORKSHEETS AND COMPUTER ANALYSIS

PRESCRIPTION PARAMETER DEVELOPMENT WORKSHEET

Project:_____ **Prepared By:**
Unit:_____ **Time & Date:**
Location:_____ **Funding:**

Criteria:	Fuel Model	Fuel Model	Fuel Model	Prescription Parameter	Forecast Value
Fuel Model					
Temperature (F)					
Relative Humidity (RH)					
Unshaded vs. Shaded (U/S)					
Aspect					
Slope (%)					
Fuel Moisture (1 hr)					
Fuel Moisture (10 hr)					
Fuel Moisture (100 hr)					
NFDRS (1000 hr)					
Live Foliar Fuel Moisture					
Wind speed (20 ft)					
Fuel Exposure (U/P/F)					
Wind speed (Mid-flame)					
Mixing Height (Ft AGL)					
Transport Wind Speed					
Direction					
Drought Index (KBDI)					
Days Since Last Rain					
Flame Length					
Probability of Ignition					
Scorch Height					
Rate of Spread (Ch/Hr					
Spotting Distance/ Maximum (Miles)					
Mortality in % by DBH Class					
Consumption (%)					

MINIMUM HOLDING FORCE WORKSHEET (UPHILL ESCAPES)	**PROJECT NAME:** **BURN UNIT:**	**PREPARED BY:**

FOR USE WITH BEHAVE FIRE1 PROGRAM (DIRECT)		
BEHAVE INPUT STEP	INPUT DESCRIPTION	INPUT
Step 1	Fuel Model For Maximum Manageable Area (MMA) Note: Use model with most severe behavior.	
Step 2	Minimum prescribed 1 hour fuel moisture	
Step 3	Minimum prescribed 10 hour fuel moisture	
Step 4	Minimum prescribed 100 hour fuel moisture	
Step 5	Minimum prescribed live fuel moisture	
Step 7	Maximum prescribed mid-flame wind speed	
Step 8	Maximum slope % for area within MMA	
Step 9	Wind direction from uphill = 0 degrees (always use 0 for this input)	0
Step 10	Run at maximum spread direction = Y or Yes (always use Y or Yes for this input)	Y or Yes
INPUTS FOR BEHAVE/DIRECT/SIZE (LINKED)		
Step 3	Maximum response time for holding forces to reach spot. (In hours)	
INPUTS FOR BEHAVE/DIRECT/SIZE/CONTAIN (LINKED)		
Step 1	Run option: 1 (Calculate total line building rate) (Always use 1 for this input)	1
Step 2	Mode of attack: 1 or 2 (1=Head, 2=Rear) (Note: Use 1 if flame lengths are <4', use 2 if flame lengths are >4'.	
Step 6	Maximum allowable size of spot fire in acres. (Note: Should be a size which will not exceed the Maximum Manageable Area or MMA.	
Results of RUN = Total production units needed to contain a spot fire at the allowable size designated in step 6 above. This value is:_____ chains/hour.		

HOLDING RESOURCES NEEDED FOR PRESCRIBED BURN PROJECT			
HOLDING FORCE RESOURCE TYPE	QUANTITY	UNIT RATE (CH/HR)	TOTAL CH/HR
NOTE: THE GRAND TOTAL MUST EQUAL THE TOTAL PRODUCTION UNITS NEEDED FROM THE RUN RESULTS.		GRAND TOTAL =	

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ESTIMATE OF COST WORK SHEET - PRESCRIBED FIRE	PROJECT NAME: BURN UNIT:	PREPARED BY:	DATE:

Planning & Implementation Project Task(s)	Estimated Cost ($)
Project planning & NEPA	
Burn Plan Development (includes computer runs & permitting)	
Pre-burn monitoring (including weather, fuels, vegetation transects, etc.)	
Pre-burn site preparation (includes fuel break construction, etc.)	
Ignition Crew Costs (personnel only)	
Holding Crew Costs (personnel only)	
Mop-Up & Patrol Costs (personnel only)	
Engine Costs (vehicle FOR & mileage only)	
Heavy Equipment Costs (including operators & transport costs)	
Overhead Costs (burn team)	
Aircraft Costs (includes recon aircraft hours)	
Ignition Supplies	
Holding Supplies	
Dispatcher Costs	
Cooperating Agency Costs (include in-kind assistance)	
Safety Supplies (include personal protective equipment)	
Normal wear & tear to existing equipment (assume $.25/acre)	
Administrative taps (use a % of total estimated costs)	
Other (specify)	
TOTAL OF ALL ESTIMATED COSTS (in whole dollars)	

UNIT COST CALCULATION:

TOTAL ESTIMATED COST _____ divided by _____ ACRES = $_____ PER ACRE

RES. SPECIALIST REVIEW:	PROGRAM MGR. REVIEW:	SUB-UNIT MGR. REVIEW:

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